

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 36 OF 52  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00504530         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>ARENA COMMUNICATIONS</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 1780 SEQUOIA VISTA CIRCLE		<div style="display: inline-block; border: 1px solid black; padding: 2px;">           10 / 24 / 2012         </div>
City SALT LAKE CITY	State UT	Zip Code 84104
Purpose of Expenditure DIRECT MAIL - DISSEMINATED ON 10/25, 24 HR REPORT FILED 10/26		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           21762.00         </div>
Category/Type		<b>Transaction ID : SB.121</b>
Name of Federal Candidate Supported or Opposed by Expenditure: LOIS CAPPS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
<div style="display: inline-block; border: 1px solid black; padding: 2px;">           512380.10         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>TARGETED CREATIVE COMMUNICATIONS, INC.</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M M / D D D / Y Y Y Y Y Y         </div>
Mailing Address 106 S COLUMBUS ST.		<div style="display: inline-block; border: 1px solid black; padding: 2px;">           10 / 24 / 2012         </div>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure DIRECT MAIL - DISSEMINATED ON 10/25, 24 HR REPORT FILED 10/26		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           10796.16         </div>
Category/Type		<b>Transaction ID : SB.123</b>
Name of Federal Candidate Supported or Opposed by Expenditure: VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
<div style="display: inline-block; border: 1px solid black; padding: 2px;">           32388.48         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">           32558.16         </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">           0.00         </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;">           32558.16         </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CALEB CROSBY

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y